CONTINUOUS QUALITY IMPROVEMENT (CQI)



Adult Protective Services

Our Vision: To prevent and reduce harm to vulnerable adults from abuse, neglect, and exploitation utilizing the least restrictive methods.

Our Commitments:

- 1. Adults have the right to be safe
- 2. Adults retain all their civil and constitutional rights unless a court adjudicates otherwise
- 3. Adults have the right to accept or refuse services
- 4. Adults have the right to make decisions that do not conform with societal norms as long as these decisions do not harm others

TABLE OF CONTENTS

Chapter 1:	Prevention and Early Intervention	3
	Adult Protective Services Intakes – 2008 to 2013.	
	Adult Protective Services Intakes – Current Calendar Year (2015)	5
	Adult Protective Services Recurrence Trends	
Chapter 2:	Safety	9
	Intake/Hotline Calls	
	Intake/Hotline Quality Measures	
	APS Accepted Intakes vs. Vulnerable Adults	
	APS Face to Face Contact Time Frames	
	APS Investigation Timeframes – Ready for Review Status.	14
	APS Investigation Timeframes – Final Status from Ready for Review.	
	APS Investigation Timeframes – Final Status from Intake	
	APS Monthly Contact	
	APS Quality Measures – Statewide – Timeliness	18
	APS Quality Measures – Statewide – Alleged Victim, Safety Response, Alleged Perpetrator, & Evidence & Contacts	
	APS Quality Measures – Statewide – Maltreatment	20
Chapter 3:	Workforce Stability	21
-	APS Intake Trends by Service Area	22
	APS Staff Vacancy Rate	23
	Average Number of Investigations per APS worker per month	24

CHAPTER 1: Prevention and Early Intervention

- OUTCOME STATEMENT: COMMUNITIES WILL HAVE AN UNDERSTANDING AND OWNERSHIP OF PREVENTING AND INTERVENING IN THE PROTECTION OF VULNERABLE ADULTS FROM ABUSE, NEGLECT, OR EXPLOITATION.
- Goal Statement: Increase the public's awareness of the role of Adult Protective Services.

Adult Protective Services Intakes – Past 3 Years

Strengths/Opportunities:

The number of accepted APS intakes has increased each year since 2008. 2014: Overall, there were 37 more intakes accepted than in 2013. Severa

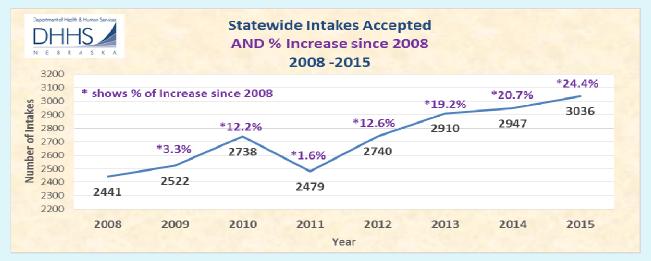
intakes accepted than in 2013. Several service areas had a lower number of intakes received in 2014 than in 2013. (CSA, NSA, and SESA).

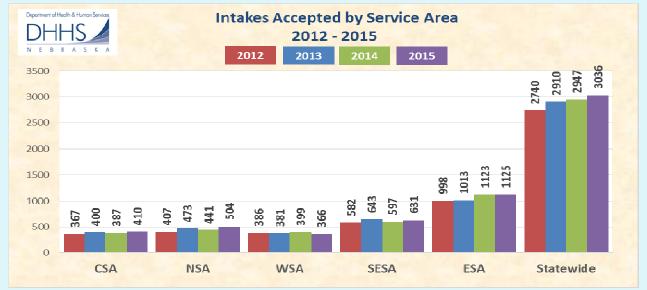
2015: Overall, there were 89 more intakes accepted than in 2014. CSA, NSA, SESA, and ESA saw an increase in the number of intakes throughout the year, while the WSA saw a decease in the total intakes received throughout 2015.

Barriers:

Action Items:

What are the overall trends of accepted APS intakes over the past 3 years?





Adult Protective Services Intakes – Past 3 Months

Strengths/Opportunities:

May 2016: The state remains consistent at about a 25% acceptance rate based on intakes received by the hotline.

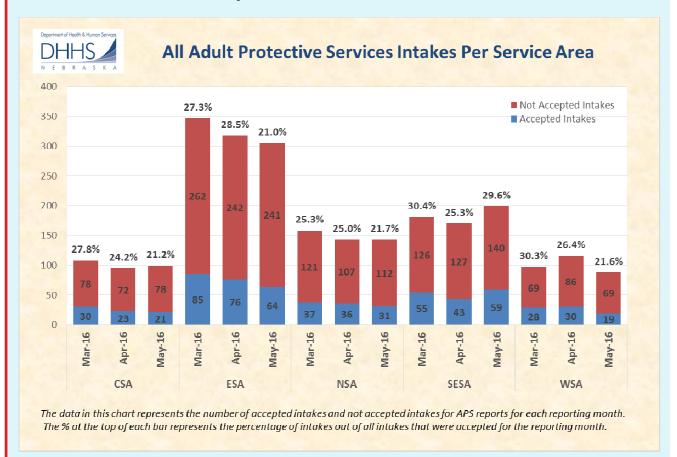
Barriers:

Action Items:

Total accepted intakes for the current year (Jan 2016 - present):

CSA: 112 ESA: 384 NSA: 172 SESA: 258 WSA: 130

How many APS intakes are accepted vs. not accepted for each Service Area over the past 3 months?



This data reflects all the APS Intakes during the reporting month including accepted intakes and intakes not accepted. This data does not reflect multiple reporter intakes.

Source: 2016-05 Intake QA Report

APS Recurrence Details

Strengths/Opportunities:

October 2015: Statewide overall victim recurrence increased from 6.3% to 6.8%. Perpetrator recurrence increased from 2.4% to 2.9% during the new period under review.

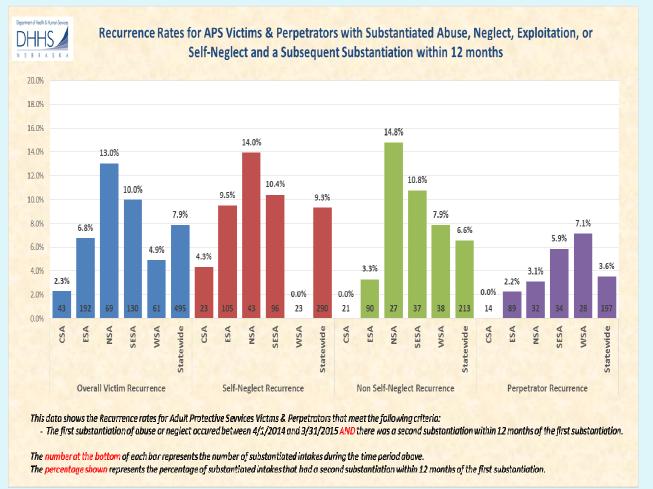
April 2016: Statewide overall victim recurrence went to 6.6%. Perpetrator recurrence decreased to 2.7% overall.

May 2016: Statewide overall victim recurrence increased to 7.9%. Perpetrator recurrence increased to 2.7% overall.

Barriers:

Action Items:

What is the recurrence rate for Adult Protective Services victims & perpetrators on different types of intakes over time?



Source: 4.1.2014 to 03.31.2015 APS Recurrence Details

APS Recurrence Trends

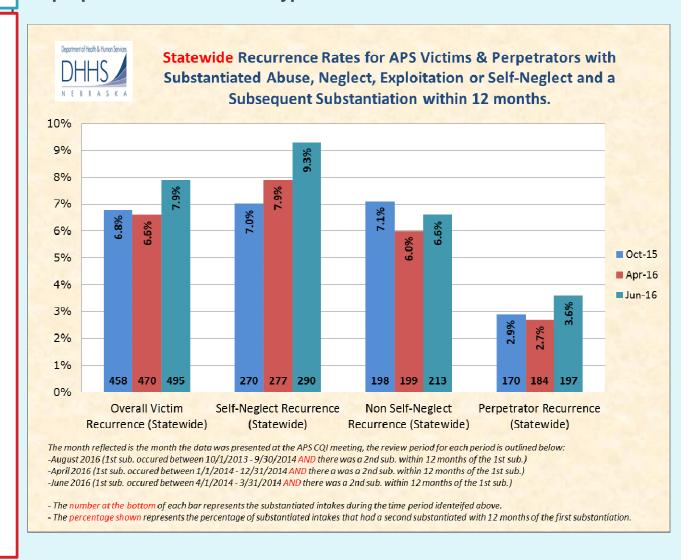
Strengths/Opportunities:

May 2016: New chart illustrating the trends for statewide recurrence rates.

Barriers:

Action Items:

What is the recurrence rate for Adult Protective Services victims & perpetrators on different types of intakes over time?



othly

Source: 4.1.2014 to 3.31.2015 APS Recurrence Details



CHAPTER 2: Safety

• OUTCOME STATEMENT: VULNERABLE ADULTS IN THE ADULT PROTECTION SYSTEM ARE SAFE.

- Goal Statement #1: Adult protection and safety staff are committed to integrating Structured Decision Making into all aspects of work
- Goal Statement #2: Vulnerable adults will receive a timely response from Adult Protective Services
- Goal Statement #3: Adult Protective Services ensure the safety and dignity of vulnerable adults using the least restrictive interventions

Intake Calls / Responses – All Calls & APS Breakout

Strengths/Opportunities:

May 2016: This month had a lower number of overall calls than last month.

APS Investigation calls went from 917 (14.3%) of all calls in April 2016 to 862 (14.0%) of all calls in May 2016.

Barriers:

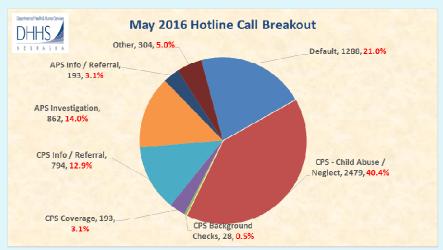
Action Items:

Definitions for each type of call are below the chart.

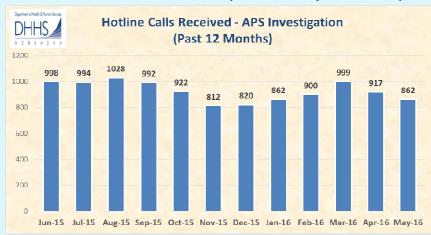
Source: Hotline ACD & LOB Data

Data Review Frequency: Monthly

How many hotline calls received each month are screened as APS Investigations?



What percentage of hotline calls answered each month were APS Abuse and Neglect calls or APS Info/Referral calls? (Current Report Month)



APS Info / Referral: Caller wants information or needs a referral to a community resource

APS Investigation: Caller intends to make an APS report CPS Info / Referral: Caller wants information or needs a referral to a community resource for children

CPS Coverage: Caller needs information on an open case

CPS Background Checks: Requests for background checks to be completed for placement

CPS Child Abuse/Neglect: Caller intends to make a CPS report Default: Calls not coded into the Line of Business system Other: Calls that are general questions that do not fit into any of the other categories and do not generate a report, NFOCUS documentation, or notification to another HHS employee

Intake Quality Measures – APS Only (3 Month Period)

Strengths/Opportunities:

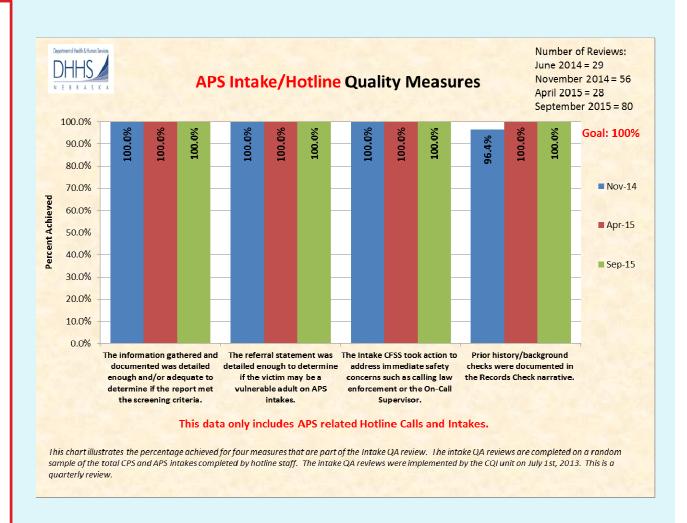
September 2015: Data indicates that APS intakes are received with enough detail to determine if the report met the screening criteria and if the victim may or may not be a vulnerable adult.

Barriers:

Action Items:

Note: This is a quarterly review.

How well does the hotline adhere to expectations established for quality intake decisions?



Data Review Frequency: Quarterly

Adult Protective Services Intakes vs. Vulnerable Adults (6 Month Period)

Strengths/Opportunities:

May 2016: Data now reflects all accepted intakes for the reporting month. Data is shown for previous months to allow all intake findings to be entered.

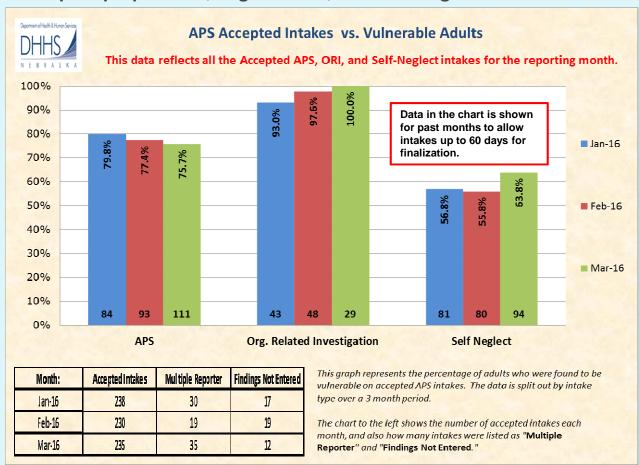
Barriers:

Action Items:

The data in the charts reflects the months in which the intake was received. The months on the chart are shown to allow for the 60 day timeframe for intakes to be finalized.

Data Review Frequency: Monthly

How often are alleged victims found to be "vulnerable adults" on accepted perpetrated, Org. Related, and Self-Neglect intakes?



Definitions will be added for the different types of intakes (Perpetrated, Org. Related, and Self-Neglect).

Vulnerable Adult: NRS (28-371): Vulnerable adult shall mean any person eighteen years of age or older who has a substantial mental or functional impairment or for whom a guardian has been appointed under the Nebraska Probate Code.

APS Face to Face Contact Timeframes (3 Month Period)

Strengths/Opportunities:

March 2016: P3 face to face contact increased to 100% while P1 face to face contact dropped to 91.7%

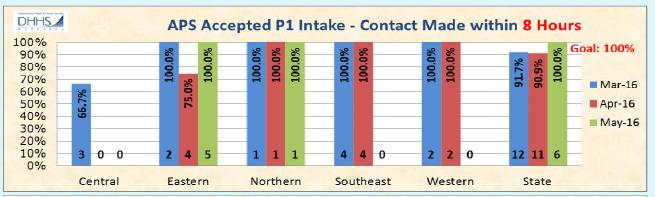
April 2016: P2 and P3 face to face contact time frames are at 100%! May 2016: P1's increased to 100% while P2's dropped slightly to 98.4%. P3's are 100% across the board for the last 3 months!

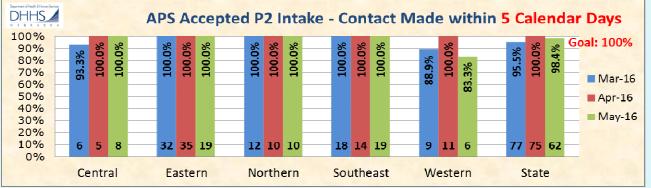
Exceptions granted for intakes accepted in May 2016:

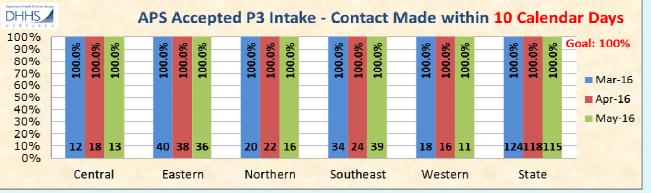
Exception Type	CSA	ESA	NSA	SESA	WSA
Unable to Locate	0	2	1	0	0
Refusal	0	1	1	0	1
Unable to Identify	0	0	0	0	0
Admin. Intake	0	0	0	0	0
Death of Victim	0	0	0	1	1
Law Enforce. Hold	0	2	0	0	0
TOTAL EXCEPTIONS	0	5	2	1	2

This data is measured for intakes accepted in May 2016.

Is face to face contact with an alleged victim occurring within established priority time frames?







Data Review Frequency: Monthly

Note: Measures are from the APS Performance Accountability report on Infoview. Source: 2016-05 APS Performance Accountability

APS Investigation Timeframes – In Ready for Review Status (3 Month period)

Strengths/Opportunities:

March 2016: Consistent rates in across all priority time frames for investigations being put into ready for review status.

April 2016: 100% for P1 timeframes into ready for review status and around 90% for P2 and P3.

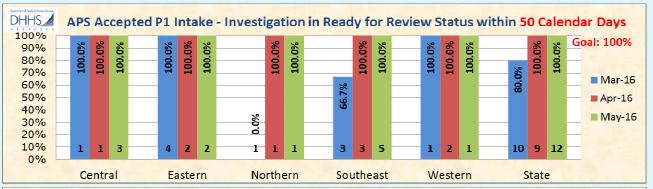
May 2016: P1's and P2's remained consistent for ready for review status while P3 timeframes dropped to 83.3%

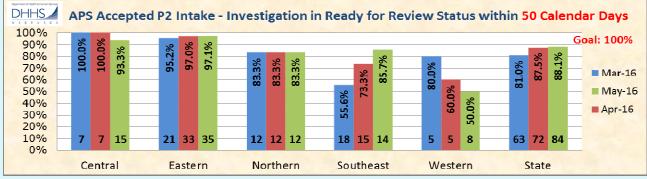
Barriers:

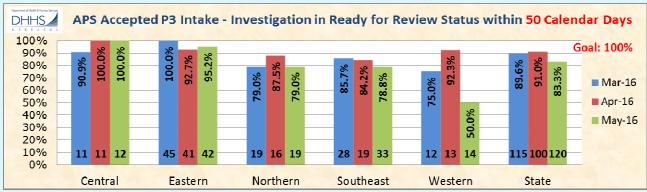
Financial exploitation cases are considered a barrier to achieving this measure due to the time requirements involved in that type of investigation.

Note: Exceptions to finalization timeframes are not reflected in the charts.

Is the APS worker submitting their draft APS Investigation to their supervisor for review within the expected timeframes?







Note: Measures are from the APS Performance Accountability report on Infoview. Source: 2016-05 APS Performance Accountability

Data in the charts is shown for March 2016 to allow intakes up to 60 days for finalization.

APS Investigation Timeframes – In Final Status from Ready for Review (3 Month Period)

Strengths/Opportunities:

March 2016: Increase in P1's being finalized within 10 days after ready to review status, with an increase in P3 timeframes and a decrease in P2 timeframes.

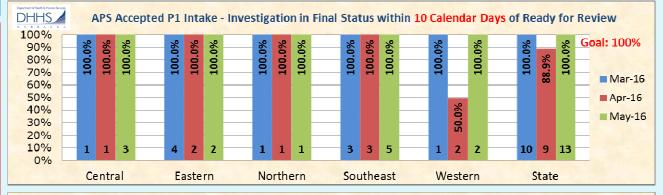
April 2016: Decrease in P1 and P3's being finalized within 10 days after ready for review status, with an increase in P2's statewide.

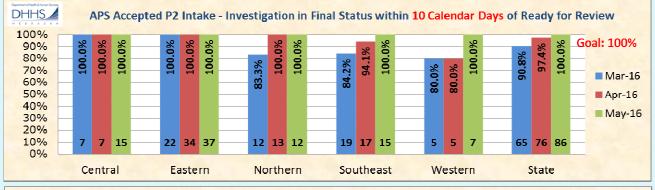
May 2016: Increase statewide in all 3 priority areas!

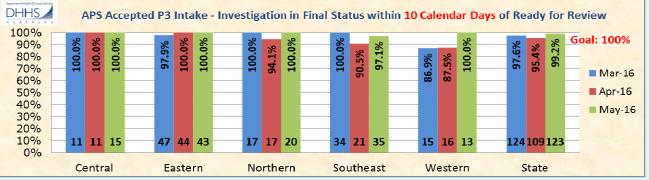
Barriers:

Action Items:

Is the APS investigation finalized by the APS Supervisor within 10 calendar days after it is submitted by the worker?







Data Review Frequency: Monthly

Note: Measures are from the APS Performance Accountability report on Infoview. Source: 2016-05 APS Performance Accountability

Data in the charts is shown for March 2016 to allow intakes up to 60 days for finalization.

APS Investigation Timeframes – In Final Status from Intake (3 Month Period)

Strengths/Opportunities:

March 2016: Increase in P1 and P3 finalization time frames, with a steady rate for P2 investigations.

April 2016: Decrease in P1's being finalized within 50 days with an increase in P2's. P3 timeframes remained the same.

May 2016: Increase in P1 and P2 timeframes with a slight decrease in p3 timeframes for finalization.

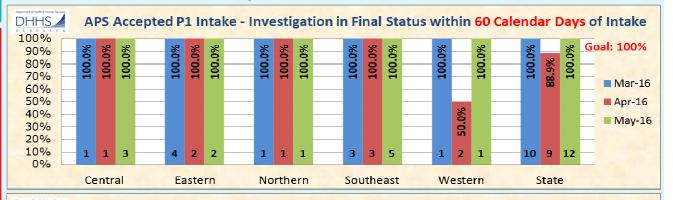
Extensions granted for intakes accepted in March 2016:

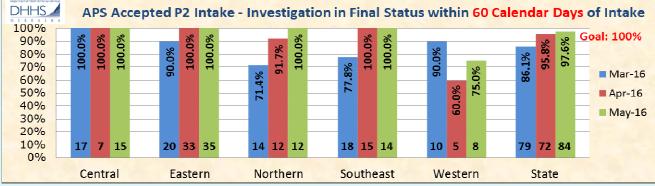
Extension Type	CSA	ESA	NSA	SESA	WSA
Invest. Timeframe	0	4	2	4	6
Admin. Intake	0	0	1	0	0
Law Enforce. Hold	0	0	0	0	0
TOTAL EXTENSIONS	0	4	3	4	6

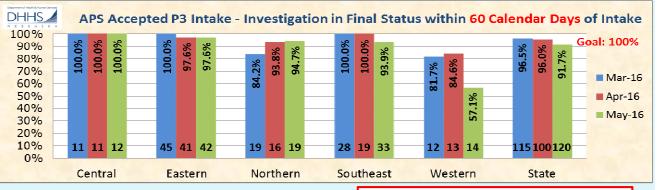
This data is measured for intakes accepted in March 2016.

Data Review Frequency: Monthly

Are APS investigations finalized within priority timeframes after the intake was accepted?







Note: Measures are from the APS Performance Accountability report on Infoview. Source: 2016 – 05 APS Performance Accountability

Data in the charts is shown for March 2016 to allow intakes up to 60 days for finalization.

Monthly Contact – Open APS Cases (Current Report Month)

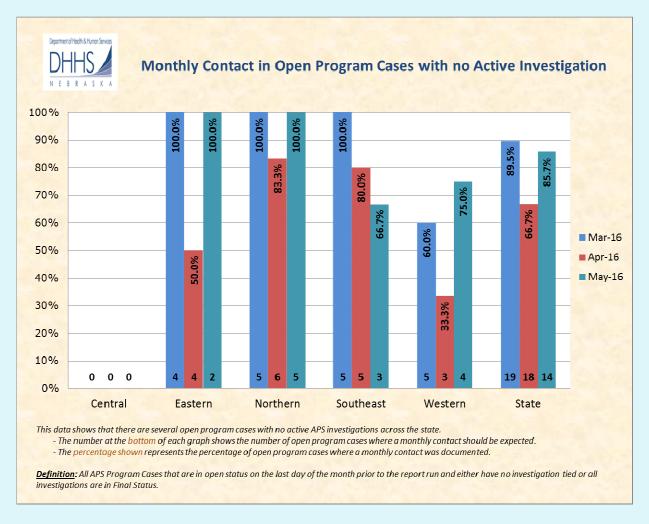
Strengths/Opportunities:

May 2016: Increase to 85.7% of open cases had a face to face contact documented.

Barriers:

Action Items:

Are monthly contacts being documented on open APS program cases with no current investigation?



Performance Standard: In open program cases with no investigation tied or all investigations in final status, the expectation is one documented face to face contact with the adult(s) per month.

Note: Measures are from the APS Performance Accountability report on Infoview. Source: 2016-05 APS Performance Accountability

APS Quality Measures – Statewide (Quarterly Review)

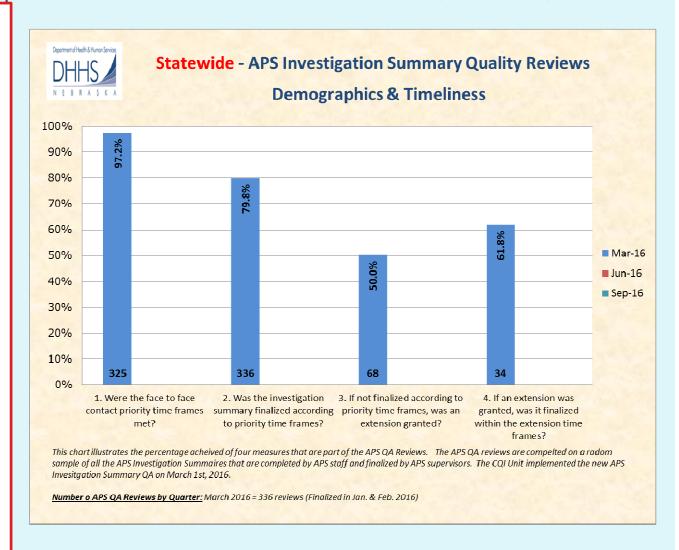
Strengths/Opportunities:

March 2016: 336 APS QA reviews were completed in March 2016. The reviewers looked over cases finalized in January and February 2016.

Barriers:

Action Items:

Does the APS Investigation Summary contain sufficient information to support decisions made during the investigation?



Note: Measure is from CQI reviews of the APS investigation summary. Random samples from each service area are selected and reviewed on a monthly basis.

APS Quality Measures – Statewide (Quarterly Review)

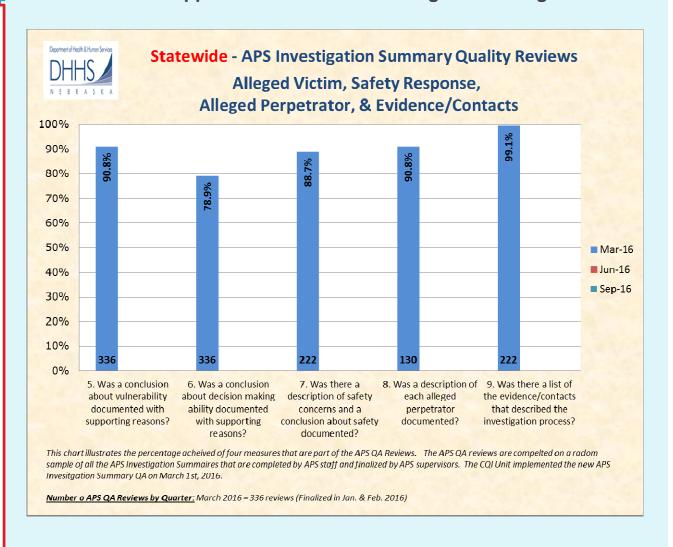
Strengths/Opportunities:

March 2016: 336 APS QA reviews were completed in March 2016. The reviewers looked over cases finalized in January and February 2016.

Barriers:

Action Items:

Does the APS Investigation Summary contain sufficient information to support decisions made during the investigation?



Note: Measure is from CQI reviews of the APS investigation summary. Random samples from each service area are selected and reviewed on a monthly basis.

APS Quality Measures – Statewide (6 Month Period)

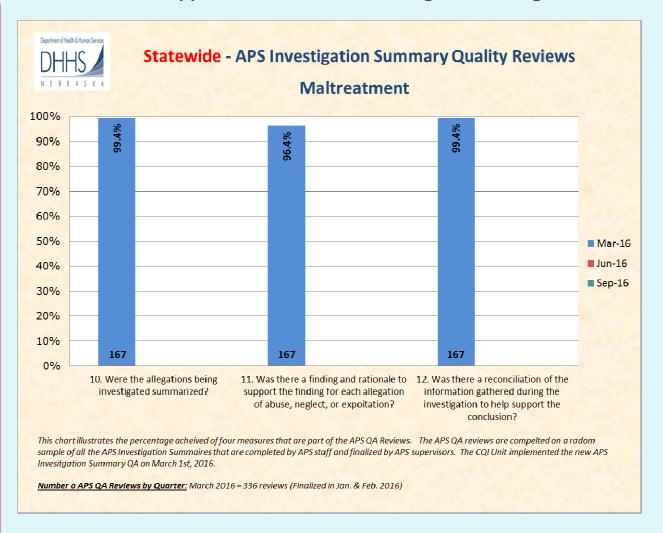
Strengths/Opportunities:

March 2016: 336 APS QA reviews were completed in March 2016. The reviewers looked over cases finalized in January and February 2016.

Barriers:

Action Items:

Does the APS Investigation Summary contain sufficient information to support decisions made during the investigation?



Note: Measure is from CQI reviews of the APS investigation summary. Random samples from each service area are selected and reviewed on a monthly basis.

CHAPTER 3: Workforce Stability

- OUTCOME STATEMENT: THE ADULT PROTECTIVE SERVICES' WORKFORCE IS WELL-QUALIFIED, TRAINED, SUPERVISED, AND SUPPORTED.
- Goal Statement #1: Reduce staff turnover
- Goal Statement #2: Provide for ongoing training for staff that addresses the skill and knowledge base needed to carry out their duties
- Goal Statement #3: Supervisory staff will be well trained and provide overall leadership for workers

APS Intake Trends by Service Area (Past 12 Months)

Strengths/Opportunities:

May 2016: CSA, NSA, and WSA have decreasing trends over the past 12 months while ESA and SESA remain steady.

Barriers:

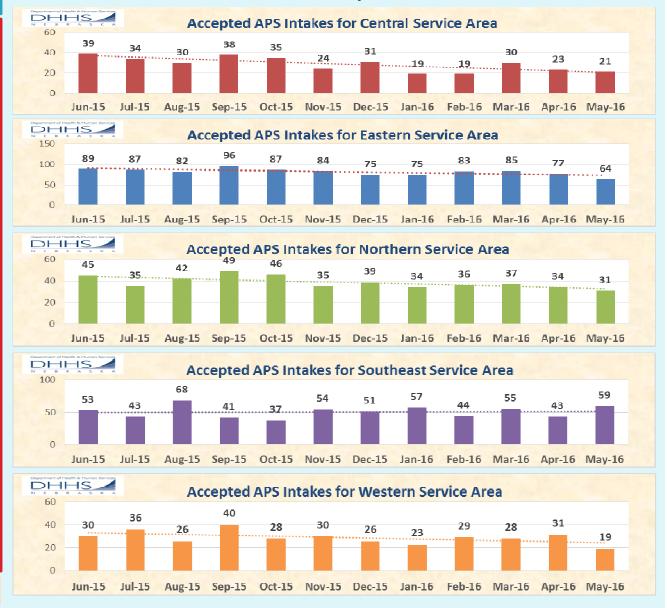
Action Items:

This data includes multiple reporter intakes.

Source: 2016-04 Intake QA Report

Data Review Frequency: Monthly

What are the current trends for accepted Adult Protective Services intakes for each Service Area for the past 12 months?



APS Staff Vacancy Rate (6 Month Period)

Strengths/Opportunities:

March 2016: One position on extended leave in WSA and one trainee and open position in SESA.

May 2016: Several trainee positions at this time.

Barriers:

Action Items:

*Planned: In the future, APS Staff could have their own classification.

How many APS positions were available for a full case load and how many positions were in Trainee status in a given month?

APS Positions (Full Case Load) by Service Area						
	Dec-15	Jan-16	Feb-16	Mar-16	Apr-16	May-16
CSA	4/4, 100%	4/4, 100%	4/4, 100%	4/4, 100%	4/4, 100%	4/4, 100%
ESA	10/11, 90.9%	11/11, 100%	11/11, 100%	11/11, 100%	11/11, 100%	9/11, 81.8%
NSA	5/5, 100%	5/5, 100%	5/5, 100%	5/5, 100%	5/5, 100%	5/5, 100%
SESA	7/7, 100%	7/7, 100%	6/7, 85.7%	5/7, 71.4%	6/7, 85.7%	6/7, 85.7%
WSA	3/4, 75.0%	3/4, 75.0%	3.5/4, 87.5%	3/4, 75.0%	3.5/4, 87.5%	3.5/4, 87.5%
Total	29/31, 93.5%	30/31, 96.8%	29.5/31, 95.5%	28/31, 90.3%	29.5/31, 95.5%	27.5/31, 88.7%

APS Positions (Trainee Status) by Service Area							
	Dec-15	Jan-16	Feb-16	Mar-16	Apr-16	May-16	
CSA	0/4, 0.0%	0/4, 0.0%	0/4, 0.0%	0/4, 0.0%	0/4, 0.0%	0/4, 0.0%	
ESA	1/11, 9.1%	0/11, 0.0%	0/11, 0.0%	0/11, 0.0%	0/11, 0.0%	2/11, 18.2%	
NSA	0/5, 100%	0/5, 0.0%	0/5, 0.0%	0/5, 0.0%	0/5, 0.0%	0/5, 0.0%	
SESA	0/7, 0.0%	0/7, 0.0%	1/7, 14.3%	1/7, 14.3%	1/7, 14.3%	1/7, 14.3%	
WSA	0/4, 0.0%	0/4, 0.0%	0/4, 0.0%	0/4, 0.0%	0/4, 0.0%	0/4, 0.0%	
Total	1/31, 6.5%	0/31, 0.0%	1/31, 6.5%	1/31, 6.5%	1/31, 6.5%	3/31, 9.7%	

Source: Self-Report from all the Adult Protective Services Supervisors.

Average Investigation Per APS Worker Per Month

Strengths/Opportunities:

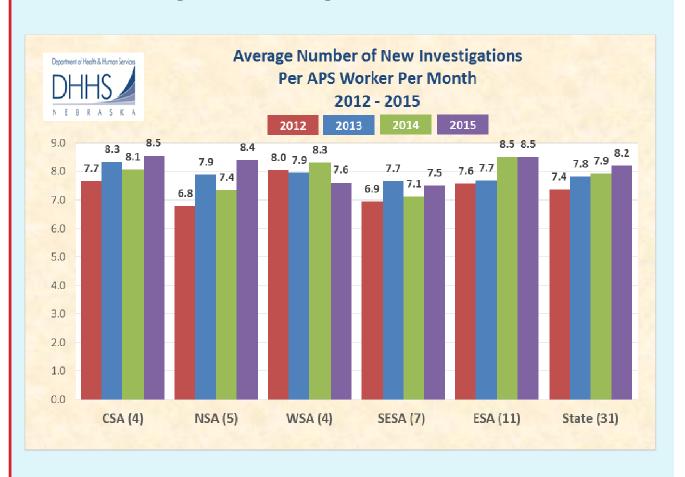
The average number of APS intakes per worker per month increased slightly from 2012 to 2013.

2014: The average number of intakes per worker increased from 2013, but several service areas decreased.

2015: The average number of intakes per worker per month increased in CSA, NSA, and SESA while ESA remained the same, and WSA saw a decrease in the average number. Statewide the average number of new intakes per worker per month increased to 8.2.

Note: The number next to each service are represents the total allotted positions for the current year (2015).

On average, how many investigations were completed by APS workers in each Service Area and how many of those investigations were for Self Neglect, APS, or Org. Related Intakes?



This data only represents new investigations. It does not reflect the number of ongoing cases managed by APS.



Prepared by:

Nebraska Department of Health and Human Services
Children and Family Services
Research, Planning and Evaluation Unit
402-471-5361

DHHS.CQI@nebraska.gov

